

APPLICATION FOR ANIMAL CONTROL AGENCY CERTIFICATION

This application must be completed by the animal control agency head or person authorized by the agency head in order to be certified as a euthanasia facility pursuant to Chapter 321 of the Kentucky Revised Statutes adopted by the Kentucky Board of Veterinary Examiners. All questions must be answered and the answers thereto shall be subscribed and sworn to as set forth below:

PLEASE PRINT OF TYPE

1. Name of agency: _____
2. Agency Mailing Address: _____
3. Street address if mailing address is P.O. Box _____
4. Telephone number: _____ Fax number _____
5. Name of designated on-site manager of the shelter _____

You are instructed that an application for certification shall not be complete until you have met the following requirements: (1) completion of the Animal Control Agency Certification Application (2) payment of \$50.00 fee (3) inspection of the facility by Board authorized person (4) proof of registration as a practitioner and designated "animal shelter" on the appropriate DEA form

I hereby state, under oath, that the statements contained herein are true.

Signature of Agency Head or Designee

Date

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Do Not Write Below This Line – For Board and Office Use Only

Fee Receipt: Amount \$ _____
Approved _____ Denied _____ Certification Number _____
Date of Certification _____